2006

Form 990-T	E		anization Bus				ax Return	1	OMB No 1545-0047
	_ ا		and proxy tax und				מת את את	ا ۸	2019
	Forca					_		<u>~</u> [2019
Department of the Treasury Internal Revenue Service	•	Do not enter SSN num	rw.irs.gov/Form990T for in bers on this form as it may	be ma	de public if you	r organiz			Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed		Name of organization (Check box if name c	hanged	l and see instruc	ctions.)		Emp	oyer identification number loyees' trust, see ctions)
B Exempt under section	Print	TRUSTEES O	F GRINNELL CO	OLL	EGE				2-0680387
X 501(c √3)	TVD0		om or suite no. If a P.O. box	x, see I	nstructions.				ated business activity code nstructions)
408(e) 220(e)	Туре	733 BROAD	STREET]	
408A530(a) 529(a)		City or town, state or p	rovince, country, and ZIP of IA 50112-22		n postal code			900	099
C Book value of all essets at end of year		F Group exemption nu	mber (See instructions.)	>					
2,534,031,9	88.	G Check organization t	ype 🕨 🗓 501(c) corp	oratio	n 501	(c) trust	401(a)	trust	Other trust
H Enter the number of the	•			3		Describe	the only (or first) un	related	
trade or business here						•	, complete Parts I-V.		•
		=	ious sentence, complete Pa	rts I ar	id II, complete a	Schedule	e M for each addition	al trade	or
business, then complete									T
I During the tax year, was				it-subs	idiary controlled	group?	▶ 1	Ye	s X No
If "Yes," enter the name a J The books are in care of						Toloph	ione number > 6	11_	269-9800
		le or Business In			(A) Inco		(B) Expenses		(C) Net _
1a Gross receipts or sale					(//)		Terres passages	が対象	10,100
b Less returns and allow			c Balance ►	16					
2 Cost of goods sold (S		A, line 7)		2					53.00
3 Gross profit. Subtract		•		3				14.15°	
4a Capital gain net incon	ne (attac	h Schedule D)		48			10 VA (10 VA)		
b Net gain (loss) (Form	4797, P	art II, line 17) (attach Fo	rm 4797)	4b			的一些智能的		
c Capital loss deduction	n for trus	sts		4c			TO BENEFICE		
5 Income (loss) from a	partners	ship or an S corporation	(attach statement)	5	<u>475,</u>	<u>510.</u>	STMT 2		475,510.
6 Rent income (Schedu				6					
7 Unrelated debt-financ			_	17					
			d organization (Schedule F)	8					
			organization (Schedule G)	9					
10 Exploited exempt activ	_			10					
11 Advertising income (S12 Other income (See ins		•		12				CASE A	
13 Total. Combine lines				13	475,	510.	TO STORY OF STREET, ST.	7.35" "	475,510.
Part II Deductio			ere (See instructions fo				<u> </u>		2,3,3200
(Deductions	must b	e directly connected	with the unrelated busin	ess inc	come.)	•			
14 Compensation of off	icers, dii	rectors, and trustees (Sc	hedule KRECEIV					14	
15 Salaries and wages				=U	-100			15	
16 Repairs and mainten	ance		MAY 1 0 20	104	080-			16	
17 Bad debts			MAY 1 0 20	121				17	<u>-</u>
18 Interest (attach sche	dule) (se	ee instructions)						18	
19 Taxes and licenses	<i>[</i>		OGDEN,	UT				19	7,113.
20 Depreciation (attach	/					20			
	aimed on	Schedule A and elsewh	ere on return		[2	1a	·	21b	
22 Depletion		mannation along						22	
23 Contributions to defe24 Employee begefit pro		ripensation plans						23 24	
24 Employee benefit pro25 Excess exempt expension	-	hadula I)						25	
26 Excess readership co			,				,	26	
27 Other deductions (at					SEE	STAT	EMENT 3	27	130,819.
28 Total deductions. A								28	137,932.
		-	ng loss deduction. Subtract	line 28	3 from line 13			29	337,578.
,			eginning on or after Januar						
(see instructions)		<u> </u>				STAT	EMENT 4	30	17,741.
1	axable ir	ncome. Subtract line 30 f	rom line 29					31	319,837.
023701 01-27-20 LHA FO	r Paper	work Reduction Act Noti	ce, see instructions.						Form 990-T (2019)

Form 990	_					<u> 42-</u>	0680387	Page 2
Part		Total Unrelated Business Taxa					240	
		funrelated business taxable income compute		(see instructions)	(32	319,8	<u> </u>
		ts paid for disallowed fringes	<u> </u>	<u> ت</u>		, 🕸		
		ble contributions (see instructions for limitati		STMT 6	بيا نود د د	34		384.
		related business taxable income before pre-2				5 35	287,9	<u> 153.</u>
36	Deduct	ion for net operating loss arising in tax years	beginning before January 1, 2018 (see ins	tructions)	ച	38		
37	Total o	i unrelated business taxable income before sp	ecific deduction. Subtract line 36 from line	e 35	1	37	287,9	
	•	deduction (Generally \$1,000, but see line 38			9	38	1,0	000.
39 ,	Unrela	ted business taxable income. Subtract line 3	38 from line 37. If line 38 is greater than lii	ne 37,	,			
	enter ti	e smaller of zero or line 37				39	286,9	<u> 153.</u>
Part	ŊŶ	Tax Computation				<u> </u>	· · · · · · · · · · · · · · · · · · ·	
40	Organi	rations Taxable as Corporations. Multiply lir	ie 39 by 21% (0.21)		🕨	1 40	60,2	<u>:60.</u>
41	Trusts	Taxable at Trust Rates. See instructions for t	tax computation. Income tax on the amou	nt on line 39 from;				
	T	ax rate schedule or Schedule D (Form	n 1041)		▶	<u>41</u>		
42	Proxy t	ex. See instructions	· · · · · · · · · · · · · · · · ·			- 42		
43	Alterna	tive minimum tax (trusts only)				43		
		Noncompliant Facility Income. See instructi				44		
45	Total.	Add lines 42, 43, and 44 to line 40 or 41, which	hever applies			145	60,2	60.
Part	<u> </u>	Tax and Payments			= :			
46 a	Foreign	tax credit (corporations attach Form 1118; tr	usts attach Form 1116)	48a		_		-
b	Other c	rednts (see instructions)		48b		_		
c	Genera	business credit. Attach Form 3800		. 48c		_		
đ	Credit f	or prior year minimum tax (attach Form 8801	or 8827)	48d				
8	Total c	edits. Add lines 46a through 46d				46e		
		t line 46e from line 45				47	60,2	60.
		exes. Check if from: Form 4255		m 8866 🔲 Other	(attach schedule)	48		
49	Total ta	x. Add lines 47 and 48 (see instructions)			9	49	60,2	
50	2019 n	at 965 tax liability paid from Form 965-A or Fo	orm 965-8, Part II, column (k), line 3 🔝 🌈			50		0.
51 a	Paymei	rts: A 2018 overpayment credited to 2019		- <u> </u>	84,169			
b	2019 e:	stimated tax payments		OD 1516	66,000	<u>.</u>		
C	Tax dep	osited with Form 8868		51c		_		
-	_	organizations: Tax paid or withheld at source	,			_		
		withholding (see instructions)				_		
		or small employer health insurance premiums		511		4		
0	Other c	redits, adjustments, and payments: 🔲 F	orm 2439	1 1		1 1		
		orm 4136 D	Other Total	▶ 510		_ _, _		
52	Total p	ayments. Add lines 51a through 51g				52	150,1	<u>69.</u>
		ed tax penalty (see instructions). Check if For		-		58		
		e. If line 52 is less than the total of lines 49, 50				54		
		yment. If line 52 is larger than the total of line					89,9	09.
V		e amount of line 55 you want: Credited to 20			funded	56		0.
Part		Statements Regarding Certain		•	ctions)			
	-	ime during the 2019 calendar year, did the or					Yes	No
		inancial account (bank, securities, or other) in						1 1
	FinCEN	Form 114, Report of Foreign Bank and Finance	ial Accounts. If "Yes," enter the name of th	e foreign country			ļ <u></u>	.
	here	► UNITED KINGDOM					X	├
		the tax year, did the organization receive a dis		transferor to, a forei	gn trust?		. —	X
		see instructions for other forms the organization						1 1
59		e amount of tax-exempt interest received or a						
e:	U a	der penalties of perjury, I declare that I have examined rrect, and complete. Declaration of preparer (other than	this return, including accompanying schedules an taxpayer) is based on all information of which pre	o statements, and to the parer has any knowledge	best of my knowle	ledge and bell	er, it is true,	
Sign			د امطالحا		^{nt} [May the IRS d	iscuse this return v	with
Here			04 29 2021 OFFIC	ER			hown below (see	_ [
		Signature of office	Date Title	,		Instructions)?	X Yes	No
		Print/Type preparer's name	Preparer's signature	Date	Check	rf PTIN		
Paid				<u> </u>	setf- employed			
Prep		KAREN GRIES	KAREN GRIES	12/21/20			0078514	
Use		Firm's name ► CLIFTONLARSO			Firm's EIN	41	<u>-074674</u>	9
	•		SIXTH ST, STE 300					
		Firm's address MINNEAPOLI	S, MIN 55402		Phone no.		<u>76-4500</u>	
923711 0	1-27-20					1	Form 990-T	(2019)

Schedule A - Cost of Goods	s Sold. Enter	method of inver	ntory va	luation N/A					_
1 Inventory at beginning of year	1		6	Inventory at end of year	ar		6		
2 Purchases	2			Cost of goods sold. Si	ubtract l	ine 6			
3 Cost of labor	3			from line 5. Enter here	and in f	Part I,			
4a Additional section 263A costs				line 2			7	_	
(attach schedule)	4a		8	Do the rules of section	263A (with respect to		Yes	No
b Other costs (attach schedule)	4b			property produced or a	acquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income	(From Real	Property and	l Pers	onal Property L	.ease	d With Real Prop	erty)	_	
(see instructions)									
1. Description of property									
(1)		<u>-</u> -							
(2)									
(3)		 -							
(4)								•	
		ed or accrued				3(a) Deductions directly	connect	ed with the income i	ın
(a) From personal property (if the per- rent for personal property is more 10% but not more than 50%)	centage of than	of rent for p	personal p	nal property (if the percenta property exceeds 50% or if d on profit or income)	ge	columns 2(a) an	d 2(b) (a	ttach schedule)	
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.	1			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	ı (A)	•			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	ınstruc	tions)					
				Gross income from		3. Deductions directly conn to debt-finance			
1. Description of debt-fir	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	ns
			1		<u></u>		1		
(1)									
(2)								-	
(3)									
(4)			<u> </u>				Щ.	.	
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-fina	adjusted basis illocable to nced property n schedule)	6.	Column 4 divided by column 5		7. Grass income reportable (column 2 x column 6)	(0	8. Allocable deduc olumn 6 x total of co 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%	L		<u>l</u>		
			-			nter here and on page 1, Part I, line 7, column (A)		nter here and on pag Pert I, line 7, column	
Totals				>		0.			0.
Total dividends-received deductions in	icluded in column	18				>			0.
								Form 990-7	(2019)

- 1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) (2)						
(3) (4)						
Totals (carry to Part II, line (5))	0.	0.				0.

Form 990-T (2019)

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis) 4. Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7 7. Excess readership costs (column 6 minus column 5, but not more than column 4) 2. Gross 3. Direct 5. Circulation 6. Readership advertising income 1. Name of periodical advertising costs (1) (2) (3) (4) 0. 0. 0. Totals from Part I Enter here and on page 1, Part I, line 11, col (A) Enter here and on page 1, Part I, line 11, col (B) Enter here and on page 1, Part II, line 26 Totals, Part II (lines 1-5) 0. Schedule K - Compensation of Officers, Directors, and Trustees

Form 990-T (2019)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

PARTNERSHIP INVESTMENTS UBTI - TD 9933 QUALIFYING INTEREST PARTNERSHIP INVESTMENT UBTI - TD 9933 DEEMED CONTROL PARTNERSHIP INVESTMENT UBTI - TD 9933 DEEMED CONTROL

TO FORM 990-T, PAGE 1

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 2
DESCRIPTION		NET INCOME OR (LOSS)
PARTNERSHIP INVESTMENT INCOME (LOSS)	EIN: 98-1287361 - ORDINARY BUSINESS	-18,556
PARTNERSHIP INVESTMENT	EIN: 98-1032377 - ORDINARY BUSINESS	
	EIN: 51-0385994 - ORDINARY BUSINESS	15,943
	EIN: 82-1846668 - ORDINARY BUSINESS	-78.
	EIN: 20-2859097 - ORDINARY BUSINESS	-259,750.
INCOME (LOSS) PARTNERSHIP INVESTMENT	EIN: 98-1439362 - ORDINARY BUSINESS	-20,722
INCOME (LOSS) PARTNERSHIP INVESTMENT	EIN: 38-3934677 - ORDINARY BUSINESS	278,551
INCOME (LOSS)	EIN: 26-1757836 - ORDINARY BUSINESS	27,230
INCOME (LOSS)	EIN: 80-0881180 - ORDINARY BUSINESS	116,070
INCOME (LOSS)	EIN: 90-0870325 - ORDINARY BUSINESS	330,367
INCOME (LOSS)		136,037
INCOME (LOSS)	EIN: 43~2115554 - ORDINARY BUSINESS	-12
INCOME (LOSS)	EIN: 47-5301888 - ORDINARY BUSINESS	-5,700
INCOME (LOSS)	EIN: 47~1242370 - ORDINARY BUSINESS	-1,805
PARTNERSHIP INVESTMENT INCOME (LOSS)	EIN: 36-4777989 - ORDINARY BUSINESS	-127
PARTNERSHIP INVESTMENT INCOME (LOSS)	EIN: 98~1450120 - ORDINARY BUSINESS	-185,895
	EIN: 98-1291114 - ORDINARY BUSINESS	1
	EIN: 98-1240969 - ORDINARY BUSINESS	156,649
	EIN: 27-1110989 - ORDINARY BUSINESS	-1,501
PARTNERSHIP INVESTMENT	EIN: 98-1095673 - ORDINARY BUSINESS	
	EIN: 20-2998535 - ORDINARY BUSINESS	-39,134
· ·	EIN: 27-0647235 - ORDINARY BUSINESS	68,753
	EIN: 20-2812490 - ORDINARY BUSINESS	8,375
INCOME (LOSS) PARTNERSHIP INVESTMENT	EIN: 13-3727655 - ORDINARY BUSINESS	-19,059
INCOME (LOSS)	EIN: 74~3002161 - ORDINARY BUSINESS	-86,409
INCOME (LOSS)		-23,718.
TOTAL INCLUDED ON FORM	990-T, PAGE 1, LINE 5	475,510.

86,939.

86,939.

AMOUNT 91,896 884 753 188 5,850 64 9,409 319 1,948
884 753 188 5,850 509 64 9,409 319
884 753 188 5,850 509 64 9,409 319
753 188 5,850 509 64 9,409 319
188 5,850 509 64 9,409 319
5,850 509 64 9,409 319
509 64 9,409 319
509 64 9,409 319
64 9,409 319
9,409 319
319
エノフェい
8,593
111
8,011
234
2,048
130,819
STATEMENT 4
AVAILABLE THIS YEAR

N/A

TOTAL TO FORM 990-T, PAGE 2, LINE 34

CASH ONLY

FORM 990-T	CONTRIBUTIONS S	UMMARY	STATEMENT 6	
	CONTRIBUTIONS SUBJECT TO 100% LECONTRIBUTIONS SUBJECT TO 25% LECONTRIBUTIONS			
FOR TAX FOR TAX FOR TAX	YEAR 2015 YEAR 2016 YEAR 2017 70	IONS ,044 ,280 ,671 ,341 ,867		
TOTAL CARE	YOVER ENT YEAR 10% CONTRIBUTIONS	838,203 86,939		
	RIBUTIONS AVAILABLE COME LIMITATION AS ADJUSTED	925,142 31,884	_	
EXCESS 100	TRIBUTIONS % CONTRIBUTIONS SS CONTRIBUTIONS	893,258 0 893,258	_	
ALLOWABLE	CONTRIBUTIONS DEDUCTION		31,884	
TOTAL CONT	RIBUTION DEDUCTION		31,884	

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

ENTITY 1 OMB No 1545-0047

Department of the Treasury

Name of the organization

For calendar year 2019 or other tax year beginning JUL_1 , 2019, and ending JUN_30 , 2020

2019

► Go to www.irs.gov/Form990T for instructions and the latest information. Internal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

TRUSTEES OF GRINNELL COLLEGE

Employer identification number

42-0680387

	Unrelated Business Activity Code (see instructions)							
	Describe the unrelated trade or business > E	IN: 33-1	0542	241 TD 99	<u> 333</u>	DEEMED CO	NTRO	L
Pa	Unrelated Trade or Business Inco	me		(A) Incom	e	(B) Expense	es	(C) Net
1 a	Gross receipts or sales							
b	Less returns and allowances	c Balance ▶	1c_					
2	Cost of goods sold (Schedule A, line 7)		2					
3	Gross profit Subtract line 2 from line 1c		3					
4 a	Capital gain net income (attach Schedule D)		4a			Seat Annual Control		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach	Form 4797)	4b			N. W. W. A.	學家等	
С	Capital loss deduction for trusts		4c			194 (1.7.15 MA)	(Print)	
5	Income (loss) from a partnership or an S corporate statement) STATEMENT 7	on (attach	5	-3,	227.			-3,227.
6	Rent income (Schedule C)		6					
7	Unrelated debt-financed income (Schedule E)		7					
8	Interest, annuities, royalties, and rents from a cont	rolled		 -		_		
	organization (Schedule F)		8				l	
9	Investment income of a section 501(c)(7), (9), or (1)	7)	İİ			1	ĺ	
	organization (Schedule G)		9					
10	Exploited exempt activity income (Schedule I)		10					
11	Advertising income (Schedule J)		11					
12	Other income (See instructions; attach schedule)		12			inservation of		
13	Total. Combine lines 3 through 12		13		227.	<u> </u>		-3,227.
Pai	directly connected with the unrelate	d business ın			on de	eductions.) (De	· · · · ·	ns must be
14	Compensation of officers, directors, and trustees (Schedule K)					14	
15	Salaries and wages						15	
16	Repairs and maintenance						16	
17	Bad debts						17	
18	Interest (attach schedule) (see instructions)						18	
19	Taxes and licenses			1	ı		19	
20	Depreciation (attach Form 4562)			20			┦╩┈┈┤	
21	Less depreciation claimed on Schedule A and else	where on return		213	<u> </u>		21b	
22	Depletion						22	
23	Contributions to deferred compensation plans						23	
24	Employee benefit programs						24	
25	Excess exempt expenses (Schedule I)						25	
26	Excess readership costs (Schedule J)			255	am = -		26	260
27	Other deductions (attach schedule)			SEE	STA'	rement 8	27	269.
28	Total deductions. Add lines 14 through 27						28	269.

LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income Subtract line 30 from line 29

Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

Schedule M (Form 990-T) 2019

29

30

496.

-3,496.

29 30

FORM 990-T (M)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 7
DESCRIPTION		NET INCOME OR (LOSS)
PARTNERSHIP INVESTMENT INCOME (LOSS)	EIN: 33-1054241 - ORDINARY BUSINESS	-3,227.
TOTAL INCLUDED ON SCHEE	OULE M, PART I, LINE 5	-3,227.
FORM 990-T (M)	OTHER DEDUCTIONS	STATEMENT 8
DESCRIPTION		AMOUNT
SOFTWARE		2.50
	GSTAR/INVESTCLOUD/PARILUX/CTRAC)	269.

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning JUL 1, 2019 and ending JUN 30, 2020

2019

OMB No 1545-0047

2

ENTITY

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization ▶ Go to www.irs.gov/Form990T for instructions and the latest information.
 ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Openito Public Inspection for

	TRUSTEES OF GRINNELL CO	LLE(3E	42-	<u>-06</u> 8038	7
	Inrelated Business Activity Code (see instructions) > 90009	9				
	Describe the unrelated trade or business EIN: 42-1	466	719 TD 9933	DEEMED	CONTROL	
Pă	TI Unrelated Trade or Business Income		(A) Income	(В) Ехр	enses	(C) Net
1 a	Gross receipts or sales			-		
b	Less returns and allowances c Balance ▶	1c			3.5	
2	Cost of goods sold (Schedule A, line 7)	2			Sales-artis	
3	Gross profit Subtract line 2 from line 1c	3				
4 a	Capital gain net income (attach Schedule D)	4a		80 4 Julio 6 A	100 m	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			1988 ASS	
c	Capital loss deduction for trusts	4c			25/2/20	
5	Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 9	5	-23			-23.
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)		ı		ľ	
	organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10				<u>- — — — — — — — — — — — — — — — — — — —</u>
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12		1864, 1887	200	
13	Total. Combine lines 3 through 12	13	-23			-23.
14	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business in Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages				15	
16	Repairs and maintenance				16	
17	Bad debts				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	
20	Depreciation (attach Form 4562)		20		78.576	
21	Less depreciation claimed on Schedule A and elsewhere on return		21a		21b	
22	Depletion		[2.4]	_	22	
23	Contributions to deferred compensation plans		•		23	
24	Employee benefit programs				24	
25	Excess exempt expenses (Schedule I)				25	
26	Excess readership costs (Schedule J)				26	
27	Other deductions (attach schedule)				27	
28	Total deductions. Add lines 14 through 27				28	0.
29	Unrelated business taxable income before net operating loss deduce	ction S	Subtract line 28 from li	ine 13	29	-23.
30	Deduction for net operating loss arising in tax years beginning on o				230	
	instructions)		•	STMT	10 30	0.
31	Unrelated business taxable income Subtract line 30 from line 29		<u> </u>		31	-23.
LΗΔ	For Bananyark Baduction Act Notice con instructions		-		Schadula	M (Form 990-T) 2019

FORM 990-7	r (M)	INCOM	ME (LOSS)	FROM PA	RTNERSHIPS	STATEMENT 9
DESCRIPTIO	ON					NET INCOME OR (LOSS)
PARTNERSHI INCOME (LO		CEIN: 4	12-1466719	9 - ORDII	NARY BUSINESS	-23.
mama =				_		
TOTAL INCI	LUDED ON SCHE	EDULE M,	, PART I,	LINE 5		-23.
SCHEDULE M			OPERATIN		EDUCTION	STATEMENT 10
		NET		G LOSS DI	EDUCTION LOSS REMAINING	
SCHEDULE M	1	NET	OPERATING LOSS PREVIOU	G LOSS DI	LOSS	STATEMENT 10